# **CITIZEN COMPLAINT FORM**

If assistance is needed in completing this form, please ask any available police officer.

Did any officer advised you of badge number(s) if known.	your right	to file a compla	aint?	YES NO If	yes, please	e include the offic	rer(s)' name or	
Did any officer attempt to disc include the officer(s)' name or				int? YES	NO <i>If ye</i>	es, please describe	e and please	
Complainant Information								
Name (optional)								
Physical Address								
Mailing Address								
Email Address								
Contact Telephone Number(s)								
Preferred Contact Time								
Incident Information								
Location of Incident						Date of Incident	t Time of Incident	
Nature of Complaint (Please give a brief description of what occurred)								
Witness Information			T					
Name of Witness (if known) or Description of Witness (if name is unknown)			Address of Witness			Telephone Number	Relationship to Complainant	
11 11 15 15 0ff 101	111 E							
Identity of Police Officer/Civilian Employee  Name of Police Officer/Civilian Employee (if known) or Description of Police Officer/Civilian  Pades / PDN Name of Police Officer/Civilian								
Employee (if name is unknown)						dge/PDN Number	Vehicle Operated	
		· · · · · · · · · · · · · · · · · · ·			*-1-1*			
See reverse side for Complaint Form Guidelines  Complainant's Signature (Optional): Date: CCN#:								
Complaniant 3 Signature (Optional).				Date.	CCIVII.			
Reporting Supervisor's Name and PDN#: Reporting C					cer's/ Agent's Name & PDN #:			
Zone (Section receiving this report): Date and Time of this I			of this R	port: Internal Affairs # (if applicable)		ole)		
Internal Affairs Section Only								
Reviewer (Print Name & Signature) Date:						Date Received by Internal Affairs:		

#### CITIZEN COMPLAINT FORM

# **Complaint Form Guide**

This form is to assist a Citizen in filing a complaint against any Virgin Islands Police Department Employee. It has been designed to minimize your contact with Police Department Personnel, if that is your desire.

- Each complaint will receive an identifying number, the "control" number listed on the top right of the form.
- You may fill out the form and deliver it to a Zone and receive a control number immediately. Additionally
  you may deposit it in one of the boxes at the Police Stations, or you may mail the form to either of the
  following addresses:

### **Internal Affairs Bureau**

Virgin Islands Police Department Alexander Farrelly Justice Complex St. Thomas, V.I. 00802

Phone: 340-774-2452 Fax: 340-774-7020

Email: internal.affairs@vipd.gov.vi

#### **Internal Affairs Bureau**

Virgin Islands Police Department #45 Mars Hill Frederiksted, VI 00840

Phone: 340-778-3066 Fax: 340-778-0470

Email: internal.affairs@vipd.gov.vi

- You do not have to put your name on the form, but if you wish to receive your Control number you must leave some information so that an Internal Affairs Investigator can reach you.
- You may also speak to a supervisor and make a verbal complaint, the supervisor will then take the necessary information and give you a control number and contact numbers for the Internal Affairs Bureau.

## **Complaint Procedure**

- 1. Police Department employees shall provide assistance to citizens who want to file a complaint against any Police Department employee, police procedure or policy of this Department. This includes but is not limited to:
  - a. Calling a Supervisor to a scene to document a complaint;
  - b. Explaining the Department's complaint procedure;
  - c. Providing referrals to individuals and/or locations where such complaints can be made in person; or
  - d. Explaining alternative means for filing complaints, such as by phone or mail.
- 2. Complaints may be received by supervisory members of the Police Department either in person, over the phone, email, or in writing and may be filed anonymously or by using this complaint form.
- 3. The Supervisor will explain to the Complainant the complaint investigation process. If appropriate, the supervisor may explain the procedures which may have precipitated the complaint.
- 4. The Complainant shall receive a copy of the complaint as filed with the Department and shall be asked to verify by signature if it is a complete and accurate account. If the Complainant elects not to sign, this fact shall be documented and the investigation will proceed.
- 5. IAB may assume concurrent or sole authority for the investigation upon notification of the supervisor or commander, IAB may also recommend that the investigation be completed by the Command.
- 6. Should an investigation at any time reveal evidence of criminal conduct, all information shall be forwarded to the Commissioner and IAB as soon as possible.